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# WILL COUNTY EMERGENCY MANAGEMENT AGENCY DONALD B. GOULD, DIRECTOR 302 NORTH CHICAGO STREET JOLIET, ILLINOIS 60432

OFFICE: (815) 740-8351 24-HOUR EMERGENCY: (815) 740-0911 FACSIMILE: (815) 723-8895

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| TO:                           | FROM:                               |
|-------------------------------|-------------------------------------|
| Maria Gonzalez                | Harold Damron, Deputy Director      |
| COMPANY:                      | DATE:                               |
| US EPA                        | 05/02/00                            |
| FAX NUMBER:                   | TOTAL NO. OF PAGES INCLUDING COVER: |
| 312 886 0747                  | 6                                   |
| PHONE NUMBER:                 | WCEMA INCIDENT NUMBER:              |
|                               | 00-038                              |
| KĚ:                           | IEMA INCIDENT NUMBER:               |
| Abandoned Trailer, Crest Hill | 00-0460                             |

#### NOTES/COMMENTS:

This fax includes the following documents:
Will County EMA Incident Report (2 Pages)
Will County EMA Incident Log (2 Pages)
Illinois EMA Field Report (1 Page)

EPA Region 5 Records Ctr.

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### WILL COUNTY OFFICE **OF EMERGENCY MANAGEMENT**

## INCIDENT DEPORT

| COMP    | ETE | DATU | CIDEC |
|---------|-----|------|-------|
| 1.11111 |     |      | SIDES |
|         |     |      |       |

Report Number:

|                                                             | INCIDENT REPO                                             | <del>-</del>                                                           | MA Incident Number:<br>ch/Warning Number: | 00-0460                                                              |
|-------------------------------------------------------------|-----------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------------------------------|
| Emergency Non-Emergency Exercise/Training Other             | Response Needed Information/Notification                  | OCCURRED  03 / 13 / 00  UNKNOWH Hours                                  | REPORTED  3 / 16 / 00  13/5 Hours         | TERMINATED  / /  Hours                                               |
| NATURE OF INCIDENT:  LOCATION OF INCIDENT/ARE               |                                                           | Rt. 53 North of E.<br>Jon John Rd) -                                   |                                           |                                                                      |
| COMPANY OR FACILITY NAM<br>IN NEAR CITY:                    | 9                                                         | ZIP CODE: (                                                            |                                           | ackport                                                              |
| NOTIFIED BY:  NAME:                                         | Casford  Esponsible Party Mesponse Ag  BER: 815 / 741 - 5 | jency Other:                                                           | ganization: <u>Crest f</u>                | tiu P.D.                                                             |
| 901 907<br>330 902 908<br>330 903 931<br>904 961<br>905 950 | 1FIED:  952                                               | OTHER AGENCIES NOTIFIE  Fire Brigade  Fire Dept: LOCKPOY  Police Dept: | IEMA Nati. I Faxtra Pagin                 | 800/782-7860 Response Cnt. 800/424-8802 Grps: Grps: LEPA DON KIODKIL |

Incident 00-038 March 16, 2000

Abandoned Trailer on Route 53 north of the E.J.& E. viaduct, south of old Speedway gas station on the west side of roadway.

| TIME<br>1315 hrs | EVENT received call from Crest Hill P.D. reference abandoned trailer at above stated location. Trailer is marked for tow in 10 days, has no markings, nothing leaking from it, however, odor of oily substance. Crest Hill is requesting someone to look into it. |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1330 hrs         | spoke to Chief Beverly at Lockport Fire and he requested us to call him when we have someone enroute.                                                                                                                                                             |
| 1330 hrs         | spoke to 902 and he will be available in approximately 30 minutes.                                                                                                                                                                                                |
| 1345 hrs         | 902 enroute to location. Advised Crest Hill P.D. and Lockport Fire who will send units over to check into the matter.                                                                                                                                             |
| 1400 hrs         | 902 10-23 at location, he advised that Officer Jeff Cassland, Crest Hill P.D., is also on the scene. Trailer is a Freuhauf trailer. All markings, serial numbers, and other identifiers obliterated or removed.                                                   |
| 1410 hrs         | 902 called and advised that Crest Hill PD opened the back of semi-trailer, found numerous items. Noted diesel fuel smell. 902 requested office to contact Maywood IEPA Officials concerning the matter.                                                           |
| 1412 hrs         | Tried calling Maywood, all Response Members are out in the field.                                                                                                                                                                                                 |
| 1414 hrs         | called Springfield who stated that they would page one of them for me.                                                                                                                                                                                            |
| 1417             | Contents visible from rear door and from front access hatch include old tires, semi-trailer rear doors, two chlorine-type cylinders, and an auxiliary diesel "belly" tank from a semi-trailer.                                                                    |
| 1418 hrs         | Don Klopke returned our page and we transferred him to 902 at 708/214-9601.                                                                                                                                                                                       |
| 1440 hrs         | Don Klopke called and requested that we call IEMA and report this as an incident. He has made arrangements to meet with 902 and Crest Hill PD at 10:00 a.m. tomorrow at the site.                                                                                 |
| 1441 hrs         | 902 10-8 from scene enroute back to office.                                                                                                                                                                                                                       |
| 1510             | 902 completed IEMA report. IEMA Incident number 00-0460.                                                                                                                                                                                                          |

03/17/00

10:00

902 returned to scene. Met with Officer Casland, Crest Hill PD, Ed Osowski, and Don Klopke, IEPA. IEPA advised that they will need to refer matter to their division head with regard to the potentially hazardous portion of the cargo, which includes a fuel tank and at least 8-10 acetylene-type cylinders. Crest Hill PD will contact Sgt. Schlossberg, ISP District 5 to inquire if ISP would be interested in investigating in order to attempt to locate responsible party.

10:20

902 departed scene.

03/21/00

1300

902 returned to scene. Met with Don Klopke, Jeff Casland, and Thomas Cook, OSC, USEPA. USEPA determined that they will be able to bring contractor to site on 03/22/00 to remove and suspected or actual hazardous waste.

03/22/00

10:45

902 returned to scene. USEPA, private contractor, IEPA, Crest Hill PD, and Lockport FPD all on scene upon arrival. Contractor in process of removing lp gas cylinders upon arrival. Approximately 20 100 lb. cylinders found in trailer. 55 gallon drum containing approximately 15 gallons of paint waste and thinners also found in trailer. Contractor attempting to determine distributor of lp gas cylinders in order that they may be removed from scene. If originating distributor not located, then cylinders will be burned off on site. Crest Hill PD making arrangements for removal of trailer and non-hazardous materials.

12:55

902 departed scene.

I. Callor: MAROLD DANSON

Mar-17-00 06:34A REGION THREE

7. Material (c) Involved: UNKNOWN

11. Enlaged apill extent: University [] equippe Sect [] square yards 12: [] Openized Date:

13. Banagancy units contacted

Palice CHEST HELL F.D. TILL CO.

10. Cases of selected: 1

6. Area Issolved: [.] Highway [ ] Rail [ ] Fixed Facility [] Waterway [] Air hi Other PRIVATE DRIVE

| Ι:           |     | 7  |
|--------------|-----|----|
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| $\mathbf{A}$ |     | 54 |
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|              |     | -  |

S. Incident Location:

## Illinois Emergency Management Agency

Incident Number

Notify: ILLINOIS EMERGENCY MANAGEMENT AGENCY \_1 - 600 / 782 - 7860 or 217 / 783

| FIE   | LD | RE   | PO | R  | r |
|-------|----|------|----|----|---|
| Dates | 3  | / 16 | 1  | 00 |   |

1503

Time: \_\_

| 1 - 800 / 782 - 7860 or 217 / 78                                            | 12 - 7860 Received by:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Collect HAROLD DANSON                                                       | 14. On Scone Contact: #1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Call back phone#: 815/740-8351                                              | On Scene Phonet: M/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Caller regresents: WILL CO. ESDA                                            | 15. No. injured: -0- [] Haz-mat related                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Type of incident[] Fire [] Leak or Spill                                    | Where taken:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| [] Explosion [] Water Involvement                                           | 16. Public health risks and/or precautions taken,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| [ ] Gas or Vapor cloud [ Other ANAMON. THERE TRA                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Incident Location:                                                          | BOT AT THIS THE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Street ET 53 100 YARDS SOUTE OF CATOR FARM IN                               | D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| City CREST BILL K In [] Near                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| County WILL                                                                 | 17. Assistance needed from State Agencies:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Milepoor [] RR [] River [] Highway                                          | HAVE ALREADY MAY ARRANCIDERED WITH MATHOOD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| SecRange                                                                    | NO OTHER ASSISTANCE REQUIRED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Area Involved: [.] Highway [ ] Rail [ ] Fixed Facility                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| [] Waterway [] Air 5] Other PRIVATE DRIVE                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Macerial (e) Involved: Unitables                                            | 18. Consimment/clearup actions and plans:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| (10. 211. 11. 120 11. 11. 11. 11. 11. 11. 11. 11. 11. 11                    | ROTHING AT THIS TIME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| [] Gas [] Liquid [] Semi-Solid [] Solid manness [] Pointpide [] Radiosctive |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| CAS 6                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| UNNA                                                                        | The state of the s |
| Le this a 302 (a) Retremely Herardons Substance?                            | 19: Weather: [] sunny [] overcast [] night                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| [] Yes [] No [] Unknown                                                     | [] ptly. cldy. [] zain [] snow                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Is this & RCRA Hazardous Waste?                                             | Temp F wind dir speedmph.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| [] Yes [] No [] Unknown                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| If Yes, is this a RCRA regulated facility?                                  | 20: Responsible Party: UNIXXOUN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| [] Yes [] No                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Consider: [] Truck [] RR car [] Drum                                        | Contact person: Differently                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| [] Abtwegtound tank [] Pipeline                                             | Phone #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| [] Underground tank [4] Other VARIOUS SIZE DRIVE                            | 6 Mailing address: UNIXION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| container skin: MIX 101                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Amount released: The FORM                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Rate of paleage: DECRETE / min.                                             | Maridania a TERA OCTOR DEC 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| A second                                                                    | Norifications: IEPA, OSPH, REC 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Betiensted spill extent: Unitary                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| [] equate fleet [] aquate yards                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| [] Constant Date: / / Time:                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| M Discovered Date: 3 / 13 / 00 Time: UNK                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| Sample of the contacted                                                     | On some                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| M Fine LOGRECORY FIRE DIST.                                                 | [] Pire                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| () Should                                                                   | [] Sheriff                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |